

Docket 03280087AA
Serial No. 10/647,797

RESPONSE UNDER 37 C.F.R. §1.116
---EXPEDITE PROCEDURE---
GROUP ART UNIT 2853

1



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re patent application of

Osamu Machida

Confirmation No.: 2015

Serial No. 10/647,797

Group Art Unit: 2853

Filed: August 26, 2003

Examiner: Mruk, Geoffrey S.

For: HOUSING USED IN INKJET HEAD

Box Non-Fee Amendment
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

AMENDMENT UNDER 37 C.F.R. §1.116

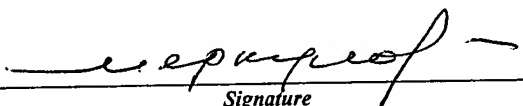
Sir:

In response to the Office Action mailed December 7, 2005, please amend the above-identified patent application as follows:

Amendments to the Claims: Amendments to the claims are indicated by the notation "currently amended" in the listing of claims beginning on page 2 of this paper.

Remarks: The "REMARKS" section begins on page 5 of this paper.

AF JFW

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 03280087AA	
Applicant(s): O. Machida et al.						
Application No. 10/647,797	Filing Date 8-26-03	Examiner Mruk, Geoffrey S.	Customer No. 30743	Group Art Unit 2853	Confirmation No. 2015	
Invention: HOUSING USED IN INKJET HEAD						
COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	6 -	24 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	2 -	3 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-2041 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 Signature			Dated: 3-3-06			
Olga V. Merkoulouva Reg. No. 48,757 Whitham, Curtis, Christofferson & Cook P.C. 11491 Sunset Hills Road Suite 340 Reston, Va. 20190 703-787-9400 Customer # 30743			<div style="border: 1px solid black; padding: 5px;"><p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____</p><p style="text-align:center">(Date)</p><p style="text-align:center">_____ Signature of Person Mailing Correspondence</p><p style="text-align:center">_____ Typed or Printed Name of Person Mailing Correspondence</p></div>			
CC:						